

Making Texas Restaurants Healthier for Children

[Announcer] *This program is presented by the Centers for Disease Control and Prevention.*

[Bret Atkins] Approximately 32 percent of the children in the United States are overweight or obese with restaurant and fast food meals contributing 17 percent of the daily calories consumed among children ages 2 to 18.

I'm Bret Atkins for CDC's journal *Preventing Chronic Disease*. I'm talking with Dr. Sylvia Crixell, Professor of Nutrition at Texas State University. Today, we'll be discussing her study which details the success of a community-based program in Texas aimed at combatting childhood obesity by partnering with local restaurants to improve children's menus. Dr. Crixell's study was featured in a December 2014 issue of *Preventing Chronic Disease*. Thank you for joining us, Dr. Crixell.

[Sylvia Crixell] Thank you. I'm delighted to be here.

[Bret Atkins] Dr. Crixell, please begin by giving us an overview of your study.

[Sylvia Crixell] Ok, in San Marcus, Texas, instead of 32 percent of children being overweight or obese, the number's closer to 50 percent. And obese children, as we know, are at higher risk for developing conditions like diabetes and depression, and also more likely to become overweight adults, so it's critical that communities, such as San Marcus, work to improve the health outlook of these children. Several studies have shown that the food environment plays an important role in dietary intake. When mostly healthy foods are available, children eat more of them and fewer unhealthy foods. However, the current reality is that foods consumed away from home are higher in calories, fat, sodium, and sugar and lower in nutrients—and the meals usually contain sugary beverages, high-fat entrées, and few fruits and vegetables. Since children consume about 20 percent of their calories in restaurants, it's important to improve menus. That would be a logical step in improving the food environment.

[Bret Atkins] What were the main changes you hoped to see made at these restaurants?

[Sylvia Crixell] Our goal in San Marcus was to work with restaurant owners and managers. And what we wanted to do was improve children's menus by adopting three obesity-prevention strategies identified by the state. And these include increasing intake of fruits and vegetables; decreasing intake of sugar-sweetened beverages; and decreasing intake of energy-dense foods.

[Bret Atkins] Were most managers and restaurant owners open to the idea of altering their children's menus?

[Sylvia Crixell] In general, during one-on-one interviews, owners and managers were concerned about child obesity. For many, obesity had directly affected the health of their family members. Some were interested in changing, but attitudes were mixed if they perceived that the profit was on the line. For example, one owner of an Asian restaurant was adamant about the value of his

soda machine, because he could sell sodas for two or three dollars while only spending pennies. So it was mixed.

[Bret Atkins] According to the study, 85 restaurants in the San Marcos area had children's menus. Why do you think only 17 participated in the FITS program?

[Sylvia Crixell] Well first, with one exception, chain restaurants could not or would not participate, even after we approached corporate headquarters with a letter supported by the state. So, in San Marcos, out of the 85 restaurants with children's menus, only 36 were non-chains, so we had a smaller pool.

[Bret Atkins] What types of foods were eliminated from the menus and give us some examples of new menu items?

[Sylvia Crixell] Well, we required that participating restaurants remove all sugar-sweetened beverages from the menus, so that was a requirement. And then they also removed fatty entrées, such as cheese enchiladas, and some sides, like fries, were also removed. And then, the new menus had, for the most part, healthier entrées, like a chicken taco or a bean taco as an entrée, and then instead of fries, they may offer carrots, broccoli, corn, or avocados. For the most part, the new sides were simply drawn from other parts of the adult menus.

[Bret Atkins] Have most of the restaurants maintained their healthier menus?

[Sylvia Crixell] We began asking restaurants to change in 2011. In 2014, of the original 17 restaurants, 12 were still using the menus. And a couple of those restaurants had actually gone out of business, so that accounts for the smaller number.

[Bret Atkins] What kind of feedback did you receive from restaurant owners and parents after the program was in place?

[Sylvia Crixell] The owners were pretty positive. They enjoyed having the new menus, which were attractive and had little cartoon characters on them. And when we did a survey of patrons, about half of them said that it was important to them that they considered nutrition when they ordered items off a menu.

[Bret Atkins] Were there any costs for restaurants associated with the change to healthier menu options?

[Sylvia Crixell] There was actually no cost difference when comparing the price of new menus to that of menus in use before the study. And this is probably because the new menus used items that were already present in the restaurant.

[Bret Atkins] What advice do you have for community members and restaurant owners looking to make these same sort of changes in their local restaurants?

[Sylvia Crixell] Well, what we learned was that owners and managers cared a lot about children's health in their community, but they also cared about profit. So, we compromised, and so while we required that sodas were taken off the menu, for example, sodas could still be sold in the restaurant and be on the adult menu. But the take-home message is that this intervention can work in other communities. We found that our brand was important, so having cute cartoon characters was important on the menus. And we think that this type of intervention can happen in many communities with health agencies or universities that have relationships with local restaurants. We suggest taking the time to get to know the restaurant owners and managers and to respect their positions. So grassroots efforts like this can change communities one restaurant at a time.

[Bret Atkins] Thank you for joining us, Dr. Crixell. You can read her study online at cdc.gov/pcd.

The findings and conclusions in this report are those of the author and do not necessarily represent the views of the Centers for Disease Control and Prevention.

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